

Application Data Sheet
Application Information

Application number::	
Filing Date::	March 24, 2004
Application Type::	Utility
Number of copies of CRF::	
Title::	WEIGHT SCALE FOR FLUID COLLECTION BAG OF EXTRACORPOREAL CIRCUIT 3659-86
Attorney Docket Number::	
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	
Latin name::	
Variety denomination name::	
Petition included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Ireland
Status::	
Given Name::	John
Middle Name::	J.
Family Name::	O'mahony
Name Suffix::	
City of Residence::	Minnetonka
State or Province of Residence::	Minnesota
Street of mailing address::	11325 Cedar Pointe Drive N
City of mailing address::	Minnetonka
State or Province of mailing address::	Minnesota
Country of mailing address::	U.S.A.
Postal or Zip Code of mailing address::	55305

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status::
Given Name:: Sonny
Middle Name::
Family Name:: Behan
Name Suffix::
City of Residence:: Sugar Hill
State or Province of Residence:: Georgia
Street of mailing address:: 4629 Kiplin Lake Court
City of mailing address:: Sugar Hill
State or Province of mailing address:: Georgia
Country of mailing address:: U.S.A.
Postal or Zip Code of mailing address:: 30518

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status::
Given Name:: Andrew
Middle Name:: J.
Family Name:: Halpert
Name Suffix::
City of Residence:: Coral Springs
State or Province of Residence:: Florida
Street of mailing address:: 3121 NW 108th Drive
City of mailing address:: Coral Springs
State or Province of mailing address:: Florida
Country of mailing address:: U.S.A.
Postal or Zip Code of mailing address:: 33065

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status::
Given Name:: Edward
Middle Name:: G.
Family Name:: Rychlick
Name Suffix::
City of Residence:: Maple Grove
State or Province of Residence:: Minnesota
Street of mailing address:: 17299 66th Place N.
City of mailing address:: Maple Grove
State or Province of mailing address:: Minnesota
Country of mailing address:: U.S.A.
Postal or Zip Code of mailing address:: 55311

Correspondence Information

Correspondence Customer Number:: **23117**

Representative Information

Representative Customer Number:: **23117**

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 USC 119(e)	60/459,971	04/04/03

Assignee Information

Assignee name:: CHF Solutions Inc.
Street of mailing address:: 7601 Northland Drive
City of mailing address:: Brooklyn Park
State or Province of mailing address:: Minnesota
Country of mailing address:: U.S.A.
Postal or Zip Code of mailing address:: 55428